

**Feedback from the Good Practice Program Workshop**

**22 April 2002**

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## Summary

Twenty-eight people attended this workshop, including the three organisers from the DHS Local Government Team. Delegates from 15 local governments and one PCP attended, representing 13 of the 16 funded Good Practice projects. Staff from five DHS Regions and Environmental Health also attended.

The workshop program included interactive discussion to promote shared understanding about:

- The diversity of projects, and their similarities and differences
- Opportunities and challenges
- Resources available to project staff
- Participants' support needs
- Monitoring and evaluation
- Potential for formation of a reference group, and
- Future directions

Evaluation and data collection were identified as key issues. The Local Government Team indicated their intention to employ an evaluation consultant to assist project staff throughout their projects; selection of consultants is at an advanced stage. It was agreed that a future session would be held to discuss evaluation.

Other outcomes from the day included:

- Initial nominations for forming an advisory group, to which additional people are invited to express interest in joining (see below)
- Initial planning for the Local Government Team to visit each project on site.
- An email/telephone contact list, which has been completed and circulated since the meeting.

Future workshops will be held for project staff to discuss progress on their projects. Other avenues will be created for project staff to share their experiences with the wider field.

The workshop was seen as a useful way for project staff to commence scoping their projects and begin to build a peer support network.

Attached are the notes collected from the many sheets of flip chart paper compiled by participants during the day. Collation and analysis has been kept to a minimum, to allow you to see the range of responses.

## Similar and Unique Features of Projects Described

Similar features	Unique features
Integration of planning and effort	A number of rural projects have focus on health professionals
Capacity building – organisation, community	Some focus on specific issues – post natal depression, mental health
Sustainability	

Resources for planning	Cross-state border – Campaspe
Documenting process – partners	A number look at MPHP / PCP integration
Creating models	Engaging communities is focus
Evaluation	The ‘Matrix’ proposal developed by Ballarat
Use of MPHP Framework	Working with community safety – Bendigo
Embracing MPHPs	Addressing resourcing gaps
Linkages – internal/external	
Indicators	
Research	
Educational – sharing	
Challenge	
Developing and managing change	
Moving forward	
Cultural change	
<i>Health Act</i> – accountability back to council / community	

## **What Excites You About Your Project? (strengths & opportunities)**

- acknowledging participation of community
- broadening understanding of 'health'
- builds on other planning
- could be 'reflective' in future
- could create definition - take fuzziness out of MPHPs, PCPs, CHPs
- cultural change
- demystifies health promotion
- engaging community
- focus is on people and social determinants
- funding provided shows 'commitment' and 'goodwill' from DHS
- higher profile for HP within council and other partners
- identifying most effective strategies with involvement of the people / stakeholders
- impact on local government political agenda / resource allocation
- internal learnings within LGA / DHS
- leadership in the field
- links with people that are not like minded 'value diversity'
- local area planning
- long term planning with other partners -> links -> consistent planning cycles
- making a difference to our communities - empowering them
- more comprehensive involvement / partnerships in implementation stage
- opportunity for good strategic plan / solid data
- opportunity to build on the work of others
- opportunity to demonstrate good health evaluation (best practice, models for use widely -> internet
- opportunity/vehicle for better inter-council strategic planning, sectors - within council i.e.. MSS + Corporate plan
- processes (systematic approach)
- public policy env; conducive to approach
- will bring about change - the way things are done
- working across units within LGAs
- \$\$ -> funding actually was available
- 16 projects across the state -> learnings

## What are the Challenges?

- community consultation - real + meaningful
- community vs. council plan
- competition of other planning processes (eg. PCPs - \$\$), (CHPs v. MPHPs and other)
- dealing with power and egos at different levels (devolution of power)
- dissemination of info to other non-funded projects
- ensuring community expectations are managed
- ensuring internal project management resources allocated / maintained
- evaluation
- evaluation
- getting councillors and community on board
- interpretation of language without diminishing 'health' (talking about health impacts)
- involving all sectors / communities
- involving councillors
- issues of - part timers, rural, distance, values , culture, priorities
- keeping everyone engaged / motivated
- lack of influence of MPHPs
- link all other planning cycles
- link to PCP? CHP
- linkages across different planning processes
- making other passionate about what you are passionate about!
- managing change process - communication
- managing the cultural shift required - "council won't be able to do this alone"
- more education about MPHPs
- no funds
- partnerships and trust - mutual benefits, time investment
- political agenda
- shifting from 'disease model' to 'social determinants'
- showcasing all stories of devt. projects + MPHPing
- start up / commencement time (when are we getting the \$\$)
- state planning integration - within DHS
- status - where it sits (image of the MPHP)
- tension b/w operational and strategic
- time involved with PCPs / similarities with PCPs / MPHPs
- to be pragmatic (reality checks)
- to be realistic about what can be achieved from projects
- to keep focused on the outcomes - health of community
- understanding / communicating potential council roles
- understanding other principles (i.e. statutory planning etc)

## What Resources Can You Use?

- Allies / champions in the organisation at the decision maker level
- audit of existing / past projects
- buy expertise?
- challenge is to link other Govt. agencies - DoI, State & Regional Devt., 'Community Building'
- community leaders
- DHS - HO
- effective use of resources (from PCP; consultations) - link with PCP
- favourable political climate
- health promotion expertise across Regions
- Information / data
- 'Leading the way' / Vichealth project - launched May '02 (aimed at Councillors and Senior Execs)
- learn from existing State projects eg. Vichealth/MAV/DHS project
- new census data (soon)
- opportunity to work with individual projects / HO + Regions, clarification of roles / potential contributions
- PCPs - finances, key players, info.
- people with expertise from other areas / skills / knowledge
- planners - social to physical / strategic
- Regional office
- research and data to support, from municipal / state wide down, community
- Resources to sustain project i.e. positions
- schools of public health - student placements, expertise
- sharing of info b/w projects
- staff employed to drive process (or lack of)
- successes and challenges of project evaluation
- Uni expertise - students research projects
- Vichealth database

## What Do You Need?

- access to academic fields
- access to experts (Vichealth/DHS/DoI etc.)
- advocacy role for DHS
- BoD - more local information needed
- BoD stats / data inform program plans
- clear behavioural changes at DHS to make changes local (inter-govt. changes)
- conceptual link CHP/PCP/MPHP by DHS (someone to articulate)
- consultation from Region with LGAs
- coordination from Regional office, eg. Regional Project Officer working on common project across Region
- data particular to your projects
- DHS - ongoing funding for Environments for Health (E4H)
- DHS to promote project - within DHS + outside
- dollars \$\$ (preferably American)
- E4H conferences / forums for workforce development
- email / contact list
- evaluation
- evaluation framework / team
- health promotion (shorter version for LGAs) / social model training
- integrated Government - within DHS / DHS + DoI + others
- joint training in evaluation and health promotion
- link b/w plan and budget
- link to community building / com. Strengthening projects -> opp.
- links to other community agencies
- maximise leverage off other projects
- more info (Briefings) from DHS to Council
- new census data
- political will
- project management training
- Regional support (particularly country)
- service utilisation data
- sharing of information
- strategies for cluster evaluation
- time
- website address

## **Gaps / Ideas for DHS LG Team to Progress**

Email tree / discussion list

Involving / linking DoI, DoJ and other Govt. Depts.

Vic Housing Strategy / Homelessness Strategy -> other plans

Community engagement – building a business case, long-term strategy

DoI resident survey of LGAs (LG Section)

Regional reporting role back to local Government - commitment <-> Best Value (identify wellbeing) / Corporate Plans – audit/reward <-> MSS

DoI Regional strategy (eg. Bendigo Regional Plan) – links in with the Metro strategy

Interface councils

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### **Reference Group Nominations to Date:**

- Angela Vindigni – Moonee Valley
- Helen Clough – Banyule
- Grace Blau – Melbourne
- Bronwyn Saffron- Baw Baw
- Anne McCamish – Shepparton
- Michelle Hollingworth – DHS NMR